

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Wag</i>		10/2/99
O.I.P.E. CLASSIFIER		5	10-14-99
FORMALITY REVIEW		64694	10-22

INDEX OF CLAIMS

✓ Rejected
 Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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